



## Discover your raleigh parks and recreation Department

### Marsh Creek Community Center

### Rental Information

#### Marsh Creek Community Center Hours of Operation

Monday - Friday

7:00am - 9:00pm

Saturday

9:00am - 3:00pm

Sunday

1:00pm - 6:00pm

#### Marsh Creek Community Center Rental Information

Room	Capacity	Cost
Art Room	38	\$35 Hourly
Classroom	45	\$60 Hourly
Multipurpose Room A	55	\$60 Hourly
Multipurpose Room B	64	\$60 Hourly
Multipurpose Room (A + B)	119	\$70 Hourly
Computer Lab	34	\$35 Hourly
Gymnasium	467	\$80 Hourly
Picnic Shelter	45	\$9 Hourly
Lower Deck	95	\$30 Hourly

Additional Fees	
Kitchen	\$20 Hourly
Supervisory Fee (After Hours)	\$20 Hourly
Damage Deposit (Refundable)	\$75
Application Fee	\$15



#### Rental Procedures

- \*All rentals are for a 2 hour minimum
- \*Reservations must be made 1 week in advance
- \*After-hours reservations must be made 3 weeks in advance
- \*Patrons may reserve the center six months in advance
- \*Alcohol is not permitted
- \*Only free standing decorations are allowed
- \*Please allow time for set up and clean up in your rental time
- \*Please check in and out with front desk attendant
- \*Application fee and \$75 damage deposit are due at the time of reservation

#### Refund Policy

- \*100% refund/credit if Department cancels activity.
- \*85% refund of recoverable fees if patron cancels 14 calendar days or more in advance of first day of programming/rental.
- \*100% transfer/credit of recoverable fees if patron requests a change 14 calendar days or more in advance of first day of the program/rental
- \*No refund/credit/transfer if patron cancels less than 14 calendar days in advance of the first day of the program/rental.
- \*Outdoor facility usage cancelled due to inclement weather may be rescheduled pending space availability.
- \*A credit may be applied towards the fees for another activity. A credit may be used by any person listed on the same registration account. A credit will be refunded upon request.
- \*All refunds or cancellations must be requested in writing. Any transfer requests must be made at the time of withdrawal.



Marsh Creek Community Center | 3050 New Hope Road | Raleigh, NC 27614 | (919) 996-4920 | [parks.raleighnc.gov](http://parks.raleighnc.gov)

Director: Heather O'Brien [heather.o'brien@raleighnc.gov](mailto:heather.o'brien@raleighnc.gov)  
Assistant Director: Shadu Jackson [shadu.jackson@raleighnc.gov](mailto:shadu.jackson@raleighnc.gov)

RALEIGH PARKS AND RECREATION

RALEIGH PARKS AND RECREATION DEPARTMENT  
GENERAL RENTAL FORM

**\*please print clearly**

Name of Responsible Person \_\_\_\_\_

Name of Organization \_\_\_\_\_

This organization is: (Circle) For Profit Non-Profit Individual/Family

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone Number (w) \_\_\_\_\_ (h) \_\_\_\_\_ (c) \_\_\_\_\_

Email \_\_\_\_\_

**\*deposit refund will be sent to address above**

Date of Use \_\_\_\_\_

Hours of Use From \_\_\_\_\_ To \_\_\_\_\_

Park/Facility Requested Marsh Creek Park

Check Specific Area Requested:

\_\_\_\_\_ Art Room

\_\_\_\_\_ Classroom

\_\_\_\_\_ Multipurpose Room A

\_\_\_\_\_ Multipurpose Room B

\_\_\_\_\_ Multipurpose Room A & B

\_\_\_\_\_ Kitchen

\_\_\_\_\_ Picnic Shelter

\_\_\_\_\_ Gymnasium

\_\_\_\_\_ Computer Lab

\_\_\_\_\_ Lower Deck

Intended use of space (ie: birthday party, reunion, meeting, etc.) \_\_\_\_\_

Number of total persons you expect to attend \_\_\_\_\_ Number under 18 years old \_\_\_\_\_

\*if total number meets or exceeds 100, Assembly Permit must be completed (Form 1)

Will this rental be catered ? (Circle)

Yes

No

\*if yes, Catering Permit must be completed (Form 2)

Will this rental involve a competition or is it open to the public? (Circle)

Yes

No

\*if yes, Vendor/Concessionaire/Admission Fee Permit must be completed (Form 4)

Do you plan to sell food/merchandise or charge an admission? (Circle)

Yes

No

\*if yes, Vendor/Concessionaire/Admission Fee Permit must be completed (Form 4)

I understand that approval of this request does not imply exclusive use of any park/facility by our group. I have read the accompanying documentation and certify that my group will abide by all. I understand that failure to follow these rules and any others imposed by the City for the good of the group and general public will automatically terminate this agreement. I understand that the rental rate is subject to review and change. The discharge of cooking grease or grease from other sources to the City's Sanitary Sewer is a violation of the City's Sewer ordinance (Raleigh City Code 8-2113(a)(14)). I understand that I am responsible for the safety and care of the facility and of the persons attending. I agree that the City of Raleigh retains the right to limit the use of or remove from the schedule any persons or group when it becomes necessary to do so for reasons of safety, maintenance or need for repairs. The Director of Parks and Recreation shall be responsible for decisions related to these requirements as needed.

**REFUND POLICY:** 100% refund/credit if Department cancels activity. 85% refund/credit of recoverable fees if patron cancels 14 calendar days or more in advance of first day of program/rental. 100% transfer of recoverable fees if patron requests a change 14 calendar days or more in advance of first day of program/rental. No refund/credit/transfer if patron cancels less than 14 calendar days in advance of the first day of the program/rental. Outdoor facility usage cancelled due to inclement weather may be re-scheduled pending space availability. All refunds or cancellations must be requested in writing.

**For Office Use Only:**

Given

Rec'd

\*Rental Process Sheet

\_\_\_\_\_

NA

\*General Info. Form

\_\_\_\_\_

\*Release & Indemnity/  
Hold Harmless

\_\_\_\_\_

\*Rules & Regulations

\_\_\_\_\_

\*Assembly Permit  
(if over 100 ppl.)

\_\_\_\_\_

\*Catering Permit  
(if using caterer)

\_\_\_\_\_

Fee Amount: \_\_\_\_\_ Deposit: \_\_\_\_\_

Total Due: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Payment: \_\_\_\_\_ Cash \_\_\_\_\_ Check / MO (#)

\_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

\_\_\_\_\_ American Express

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

Signature: \_\_\_\_\_

**Rental #:** \_\_\_\_\_

Signature of Responsible Person

Date

Facility Supervisor or Designated Staff

Date

Please submit with **full payment**. Your request will be processed within 24 business hours and a contract and receipt will be mailed or emailed to you. Your rental is not CONFIRMED until we receive your returned signed contract.